

Friendship Quality, Resilience and Psychological Distress among University Students



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Dedicated To My Beloved Parents

&

My Brother

Chapter

Introduction

Friendship may be defined in a variety of ways, but they all suggest that friendship develops over time by intentional relationships between two people. It generally manifests itself through close, face-to-face contact. Friendship is described as dyadic relationship marked by certain traits such as mutual attachment, commitment, and special concern for one another's well-being (Erdley & Day, 2017). Friendship is described as a strong sense of attachment created through mutual care, the exchange of ideas and interests, and the spending of time in each other's presence (Reisman, 1985).

Interaction of humans with each another is important as they are social beings and a vast amount of information is provided which is necessary to do activities on daily basis. Indeed, sociality is a powerful force that influences thinking, behavior, physiology, and brain activity. In the absence of healthy and long-lasting connections, both the mind and the body may disintegrate. Individuals must rely on the quality of their connections to live. . The consistency and number of social ties affect physical wellbeing, intellectual health, and wellbeing behavior. Cable, Bartley, Chandola, & Sacker (2013) stated that there is twice risk of death among men and women with the minimum social ties than adults with the maximum social ties. Well-being of adults is influenced by relationships with friends and family environments. Number of close friends, intimate family relationships and the amount of emotional support teenagers get from their friends can predict their happiness (Garaigordobil, 2015). So far, only the positive outcomes of friendship on well-being have been considered. However, friendships might also have an adverse impact on well-being of an individual. Concerning the need for belongingness, individuals may be troubled by some friends and consequently, a harmful effect on the individual.

According to Smollar and Youniss (1985), friendship is built on future planning between two or more people. Friendships are typically formed as a result of intimate, everyday regular engagement. True Friends are those who always try and specifically seek each other's presence. They seek intimacy much more when they don't have any other strong relationships in powerful social settings (Hartup, 1996). Friendship is a

connection that involves deliberate or unintentional relationships in which everyone is free to form and maintain friendships and in which friends engage with one another directly (Wright, 2000). Friendship is a meaningful connection between two people that is founded on society's sentiments of emotions and the goals of the fellows, and it may entail many changes as well as time, company, closeness, affection, and mutual help with friends (Hays, 1988).

Earlier in the late 1960s, social and behavioral scientists had little worries about friendship; since then, friendship has become one of the most prevalent and significant topics of debate. Friendship studies provide a wealth of material that is vital for academics in many disciplines, including psychology, sociology, mass communication, gender, social work, family studies, and psychiatry. It is also an international phenomena for scholars from all over the world, and these people are making significant contributions to this subject. Many academics are currently examining their work on friendship.

In general, social support appears to be more important than social network for individuals' psychological well-being (Cairney & Krause, 2005; Caron & Liu, 2011; Gadalla, 2009; Prévaille et al., 2015). Furthermore, there is some evidence that the nature and source of support may behave differently in men and women, as well as across the lifetime.

Resilience is an important factor in adjusting to the university environment (Wang & Blackmore, 2009). According to research, resilience lowers the risk of psychological distress, helps with academic demands management, and improves academic outcomes, while also promoting appropriate coping mechanisms when challenged with academic pressures (Abbott, Klein, Hamilton, & Rosenthal, 2009). The stresses that university students experience have the potential to negatively influence their mental health, cause psychological discomfort, and result in higher adjustment issues in the absence of resilience (Beeber, 1999; Edwards, Hershberger, Russell, & Markert, 2001). Previous resilience research has largely focused on individuals who have faced both acute and long-term adversity (Wagnild & Collins, 2009). Long-term challenges, such as academic stresses and environmental pressures confront university students (Pittman & Richmond, 2008). Although there is no

uniform definition of resilience, it is usually seen as an individual's ability to endure adversity and successfully adapt to their surroundings (Wagnild & Young, 1993).

Resilience is defined as a collection of qualities, a result, or a dynamic process that involves being exposed to stress or adversity, followed by effective adaptation (Ahern, Kiehl, Sole, & Byers, 2006; Luthar, Cicchetti, & Becker, 2000). According to Connor and Davidson (2003), resilience is a set of human characteristics that allows people to flourish in the face of adversity. According to Gilligan (2007), resilience is the ability to adapt properly and perform successfully in the face of adversity, or to exceed expectations during adversity. Furthermore, researchers have seen resilience as a protective buffer that protects individuals from adversity (Jackson, Firtko, & Edenborough, 2007). Overall, the data indicate that resilience in the university environment is related with better mental health, as well as a successful adjustment and adjustment to university life (DeRosier, Frank, Schwartz, & Leary, 2013).

Psychological distress is broadly defined as an emotional condition marked by symptoms of depression (e.g., loss of interest; sadness; despair) and anxiety (restlessness; tenseness) (Mirowsky & Ross, 2002). These feelings might be linked to physical issues (sleeplessness, headaches, and extreme tiredness) which varies between cultures (Kirmayer, 1989; Kleinman & Kleinman, 1991). Additional requirements are included in the concept of psychological distress, however there is no agreement on these criteria. The stress-distress model, in particular, holds that the exposure to a stressful event that threatens physical or mental health, the inability to cope effectively with this stressor, and the emotional stress that results from this ineffective coping are the defining features of psychological distress (Horwitz, 2007). They contend that psychological suffering fades when the stressor is removed or when an individual learns to cope well with the stressor (Ridner, 2004). There is enough evidence to support the influence of stress on distress; nevertheless, incorporating stress in the definition of distress fails to identify the presence of discomfort in the absence of stress.

On the other hand, psychological discomfort is seen as an emotional disturbance that can have an influence on an individual's social functioning and day-to-day existence (Wheaton, 2007). As a result, several research have been conducted

in order to determine the risk and protective variables linked with it. Distress, on the other hand, is a diagnostic criterion for some psychiatric disorders (e.g., obsessive-compulsive disorder; posttraumatic stress disorder) and in conjunction with impairment in daily living, a marker of the severity of symptoms in others (e.g., major depression; generalized anxiety disorder) (Phillips, 2009; Watson, 2009).

Psychological distress is usually described as a non-specific mental health problem (Dohrenwend&Dohrenwend, 1982). Yet, according to Wheaton (2007), this lack of specificity should be qualified since psychological distress is clearly characterized by depression and anxiety symptoms. In effect, the scales used to assess psychological distress, depression disorders and general anxiety disorder have several items in common. Thus, although psychological distress and these psychiatric disorders are distinct phenomena, they are not entirely independent of each other (Payton, 2009). The link between distress and depression and to a lesser extent anxiety highlights the concern of whether psychological discomfort may lead to depression if left untreated (Horwitz, 2007). Unfortunately, the path of psychological discomfort is mainly unclear.

Finally, characterizing psychological discomfort as a normal emotional response to a stressor poses the challenge of defining "normal function" in diverse groups and contexts. Indeed, it is widely accepted that the individual and collective experience of disease is partly bounded by cultural norms, and that while negative states of mind such as sadness, depression, or anxiety tend to be universal, the expression of these states of mind may vary in intensity and form across and within societies (Kirmayer, 1989; Westermeyer&Janca, 1997). Because of the diversity of scales used to evaluate distress, the time frames utilized in symptom documentation, and the cut-points used to dichotomize the score of distress and identify persons with pathological distress, determining the frequency of psychological distress is challenging. In the general population, it ranges between 5% and 27% (Benzeval& Judge, 2001; Chittleborough et al., 2011; Kuriyama et al., 2009; Phongsavan et al., 2006), but it can reach higher levels in some segments of the population exposed to specific risk factors, such as workers facing stressful work conditions. Chronic health issues and limits in everyday activities, whether in oneself or a close family member, have a significant influence in the epidemiology of psychological discomfort in adults (Mandemakers&Monden, 2010; Zabora et al., 2001). This link might be linked to

decreased quality of life, disturbance of social roles, and pharmaceutical adverse effects (Chittleborough et al., 2011).

Quality of Friendship

Making friends is one of the most important social experiences that humans have (Campagne, 2019), yet it has only lately been explored as a research issue. Both private and public friendships exist. It can be examined from both a philosophical and an ethical standpoint or as a personal or social reality. Friendship quality is defined as the degree to which a friendship is significant as measured by the level of friendship's features (Berndt, 2002; Marfua, 2020, Parker & Asher, 1993). According to Hartup (1999), friendship is described as a connection that is mutually beneficial, voluntary, and unbiased, in which both partners value the relationship and treat each other with respect. According to Thomas (2019), friend appears to be an extra label that applies to all of us with no more defined title, linked with the same oldness and in terms of content, friendliness, visits, meetings, and talks in the past participation in organization with themes. Homophile is defined as a tendency that refers to a higher inclination of resemblance among friends than non-friends as a result of selection and socialization processes (Richmond et al., 2019).

The term friendship quality refers to the characteristics of a friendship such as companionship, guidance, support, common interests, and assistance in conflict resolution. High friendship quality is characterized by supportiveness, openness, closeness, and low conflict, while low friendship quality is characterized by minimal support, rivalry, and high conflict. Friendship quality is related to the psychological well-being of adolescents and adults, as well as the manner in which they manage stressful life events, according to Hartup and Stevens (1999).

Close friendship is defined as a strong emotional bond between two people that is marked by mutual desire, shared pleasures, and shared experience that is also stable over time (Sigstad, 2017). Similarity, camaraderie, intimacy, intimate relationship, conflict, loyalty, support, security and stability are commonly cited as characteristics of friendship (Dolva et al., 2019; Friedman & Rizzolo, 2018; Sinabutar et al., 2021). In relationships among young individuals, collective behaviors and interactions appear to be significant in relation to friendship (Meyer & Ostrosky, 2018).

Friendship quality is described as the degree of success based on both good (intimacy, collaboration, loyalty, safety, support, and pro-social behaviors) and negative (conflict, supremacy, competitiveness) components of the friendship (Berndt, 2002; Öztürk, 2019).

The value of friendship may be measured over the life span by looking at how individuals perceive the importance of their relationships as well as the social interactions they have with one another. Friends are unlikely to share their likes and dislikes, but they are likely to support one another on a reciprocal basis. According to Hartup and Stevens (1997), good friends give advantages and increase social capital through assisting one another in overcoming life's problems and crises. On the contrary, friendships with a strained relationship may not be of any assistance or support at difficult times; rather, they become a burden which drain their friend's resources and result in bad developmental results.

According to Percival (2015), friendship is divided into three types. The first sort of friendship is utility friendship in which both partners gain from each other. The second type of friendship is based on pleasure, in which both people derive pleasure from one other, such as fun, humor, excellent looks, and so on. The third type is based on goodness in which individuals value and assist one another for the sake of betterment and righteousness. Goodness is a characteristic that lasts a long time. Friendship, based on goodness, lasts a long time because good friends are always willing to help and are nice to be around.

Kuriyama et al. (2009) conducted a research in Japanese, in this study, the odds of psychological discomfort were greater in women and men who did not have someone to turn to for guidance when they were in difficulties, as well as in women who did not have someone to consult about their health, transport them to the hospital, or care for them. Support from a group of friends is typically connected with a reduced degree of distress in adults and adolescents (Myklestad, Roysamb, & Tambs, 2012; Ystgaard, Tambs, & Dalgard, 1999).

Characteristics of Friendship

Friendship is defined as a mutual attraction in which the individuals have similar social values. Best friends are expected to spend more time together than other

friends, to provide emotional support, and to be loyal and trustworthy to one another. True friendship may not exist for everyone, yet it is sought after and appreciated from youth to old age. Friendship is considered as the relationship that provides individuals reason to love, sympathize, be affectionate, loyal, honest and to be altruistic.

Friendship is defined by a number of characteristics, including positive and equitable treatment, mutual respect, trustworthiness, and fairness (Laursen & Adams, 2018). There are a few characteristics of friendship that can be explained as follows:

- i. **Faithfulness.** To be faithful is to be loyal to the person all of the time, which is the first feature in a close connection. Friends are supposed to be loyal and trustworthy to one other at all times. In other words, friendship is a synonym for remaining loyal to loved ones even when they are not around.
- ii. **Respect.** Friendship's second most important virtue is respect. Dealing with another person entails not making light of that other's personality, sentiments, or thoughts. Respecting another individual implies that person is valuable in society.
- iii. **Integrity.** It is the friendship's third most significant trait. One of the distinguishing characteristics of a safe and treasured partnership is integrity. True love is being honest and standing by your friendship rather than purposely breaking the relationship by lying and cheating.
- iv. **Edification.** Edification refers to learning, is fourth important issue of friendship. True friendship is about building up your companion not tearing them down. Edification is about helping another person become the best they can be. According to which, you must speak positive words that lift them. Any necessary criticism should be constructive in nature.
- v. **Nearness.** It is another characteristic of a good friendship. Being close entails being there in the other person's life. This demonstrates a person's willingness to spend a lot of time with their friend in any relationship.
- vi. **Durability.** True friendship lasts a long time, according to the sixth important factor of friendship. And the strength of a friendship is determined by how well a person interacts with his or her friend.
- vii. **Sacrificial.** Being sacrificial is being sensitive and compassionate to your friend. It also suggests that you prefer your friend's likes and dislikes, as well as their opinions over your own. Friends that have a solid relationship with

their friends are a representation of good and strong positive relationships since they often sacrifice for their friends wishes.

- viii. ***Humor.*** It is the friendship's seventh quality. Laughter and the ability to laugh at oneself are essential components of true friendship.
- ix. ***Inspirational.*** It refers to friendship that encourages others to participate in a particular activity. It motivates the individual and provides opportunity for them to learn new things and engage in positive activities in their lives.
- x. ***Personal.*** It entails sharing practically everything with your buddy. Being personal with a buddy demonstrates a deep bond between them.

Friedman (1989) claims that friendship has a social value. Friendship can involve reciprocal support of unconventional values which can be a significant stimulus to moral improvement within a community, when considering the closeness of friendship in terms of sharing values. Friendship quality can vary from individual to individual. Some are characterized by mutual validation and support, companionship, intimacy, and constructive conflict resolution, whereas others are qualitatively less possible (Hartup, 1996; Parker & Asher, 1993).

In observed interactions with friends from middle childhood through adulthood, women and girls display more supportive and responsive behavior as well as self-disclosure than men and boys (Dolgin & Kim, 1994; Leaper, 2019). Way and Chen (2000) discovered that females report more support and interaction within friendships than males when it comes to friendship quality. Psychological suffering is negatively connected with high-quality relationships (Parker & Asher, 1993).

Theoretical Perspective of Friendship Quality

To have a better understanding of the notion, the following are some of the most well-known theoretical models of friendship quality developed by renowned theorists:

Dialect theory of friendship. Friendships, according to Rawlins (2001) and Brooks (2007), comprise a succession of difficult obstacles that can occur at any age. Inconsistencies that are intrinsic and innate beliefs cause such challenges in friendships. More emphasis is placed on one's capacity to discriminate between true and false friends as friendship progresses.

Interactional dialectics. Friendship, as a high-level organization for contact, openness, and emotional engagement (Brooks, 2007), has a critical role to play in assisting collectives and organizations, including practical assistance, information assistance, emotional assistance, and support for social enterprises (Ramsay, Jones, & Barker, 2007). As a link between oneself and others, and as a platform for mutual interests and conversations, friendship is critical in the construction and maintenance of identity.

This is especially significant for underprivileged populations (Goins, 2011), among whom mature students may fall. Brooks (2007) provides a comprehensive overview of current sociological ideas on friendship, focusing on friendship in more generic, late, and modern contexts. Pure connection continues to suit the demands of individuals involved by focusing on friendship as a mainly voluntary idea while also requiring trust and intimacy disclosure. Theoretical friendship with development and individuality processes suggests that friendship allows for close proximity while also allowing for distance, which aligns with Rawlin's dialectical perspective, which states that friendships are interesting because of their ambiguous and mysterious position in society: they are not defined by anything.

Rawlins (2017) focused on communicative friendship attainment, implying that friendship can be earned (rather than assigned) by communicative activity. Adult friendship, young people's connections, romantic interactions, young adult friendships, and even friendship teaching are all included in this section. Friendship is a place where meaning and identity are built. For example, friends, according to Lightsey et al. (2012), partially allow but also threaten an individual's identity. Nonetheless, it is anticipated that being friends would allow persons to be identified as such, despite the fact that the friendship process comprises a complicated risk assessment and controlled disclosure process.

Resilience

The term resilience comes from the Latin word "resilire," which means to leap back or to bounce again. This is a topic that has piqued people's interest in a variety of fields. Individuals use it as a good mindset and an effective mechanism (Jensen, Trollope, Waters, & Everson, 2008). It evolves with time, and while it is not an innate

trait of an individual, it is possible to gain stronger and new resilience skills over time (Masten, 2014).

Resilience is the most fundamental attribute that leads to academic success and psychological well-being. It is a person's ability to respond to a variety of obstacles that may arise due to a variety of factors. It is context specific and developmental in nature (Cohen et al., 2011). Individuals do well if they learn how to retain resilience in the face of adversity, such as academic and financial difficulties.

According to Cohen and Turkewitz (2012), resilience may change as a result of growth. For example, a higher level of maternal care and caregiver protection may help to increase resilience during infancy but may hinder resilience during adolescent or young adulthood. Everyone has varying amounts of resiliency (Cohen & Turkewitz, 2012). Resilience is a spectrum that ranges from a high level of strength to varying degrees of strength throughout numerous domains in a person's life (Pietrzak & Southwick, 2011). The concept of resilience is interactive in nature, and it involves examining how an individual maintains his psychological well-being in the face of adversity (Rutter, 2012).

Individuals, whether children and adults, confront difficulties and adversity both inside and outside the family unit. When confronted with these scenarios, people may recall earlier difficulties in order to come up with a solution or design a strategy for coping with the issues. In such circumstances, one-third of people from all walks of life will continuously demonstrate resilience, which will aid them in overcoming the difficult scenario (Soni & Deb, 2021).

Resilience is intriguing because it provides some type of solution as to why one person crumbles in the face of difficult situations while another gains strength from them, writes Kilbert et al. (2014), but elusive in that the idea resists a clear definition. Certain people have the ability to adjust to difficult situations, while others are unable to overcome their sorrow. As a result, the ultimate results of stressful situations are frequently determined by the individuals' levels of resilience.

Firstly, resilience can be explained as a skill. Resilience has been defined as an individual's ability to successfully adjust to unfamiliar and or unpleasant environments and includes characteristics of emotional strength and invulnerability,

despite the fact that no official definition exists among experts (Kaplan, 2013; Walker, 2020). Resistance, recovery, and reconfiguration are the three dimensions that can be used to explain resilience in particular. Understanding resilience as a capacity is aided by these three dimensions. In circumstances of resistance, challenging situations have no effect on one's capability; recovery refers to one's ability to overcome adversity and successfully adjust to new situations.

Finally, reconfiguration refers to one's ability to accept or adjust to adverse experiences and deal with future misfortune successfully and resourcefully (Herman et al., 2011). A human's ability to recover, be strengthened, and even altered by adversity or difficulty is referred to as resilience (Marshall, 2017).

Resilience, on the other hand, is a process. Resilience can also be defined as a method that is, the process of making effective adjustments in the face of adversity, such as family and interpersonal issues, major health issues, employment and financial difficulties. Protective and risk mechanisms have been defined as follows in studies dealing with resilience as a process. Protective mechanisms are developmental processes that allow people to successfully adjust to new situations (making them more resilient). Protective factors can influence, modify, mitigate, or transform how people react to extremely stressful events, as well as help people build resilience (Afifi & MacMillan, 2011). Individuals, their families, and the societies in which they live have all been subjected to extensive investigation in order to identify protective mechanisms (Zimmerman, 2013). Personal qualities (e.g., self-efficacy, coping, and life satisfaction), family-level (e.g., family cohesion, stable care-giving, and parental relationships), and community-level protective factors (e.g., peer relationships and religion) are all linked to resilience (Afifi & MacMillan, 2011). As a result, resilience might be defined as the protective systems that individuals build in the face of adversity.

Risk mechanisms, on the other hand, amplify people's reactions to stressful events, making them more exposed to the stressors (Rutter, 1987). Poor neighborhood conditions, family dysfunction, and school dropout are all risk factors (Beauvais & Oetting, 1999). Psychiatric problems can be caused by risk factors in a child's background, according to Rutter (Sameroff, Gutman, & Peck, 2003). Other research on adolescents and adults has found that risk factors contribute to behavioral

disorders and mental health issues (Fergusson, Horwood, & Lynsky, 1994). Learning challenges are similar risk factors that prevent a learner from reaching optimal learning and growth. As a result, resilience has been characterized as a process that involves minimizing the negative effects of risk factors and eliminating them through the effects of protective factors (Fraser & Pakenham, 2009).

Finally, resilience is a result. Resilience as the result of protective factor effects on people's stressful lives, directing them in the right path (Dumont & Provost, 1999; Luther, Cicchetti, & Becker, 2000). Resilience is described in this context as the positive results of healthy mental health, functional capacity, and social competence. For operationalizing the construct of resilience, focusing on the outcome of people's adaptability to stressful events is beneficial (Olsson et al., 2003).

When confronted with adversity, people are assumed to be vulnerable to negative consequences or the absence of favorable outcomes. Individuals who are raised in dangerous environments, for example, are more likely to have emotional issues. Individuals with positive personal characteristics, strong relationships with friends and others, and good mental health, on the other hand, are frequently referred to as "invulnerable" or "resilient" (Kaplan, 1999). As a result, these three as a capacity, process, and outcome provide useful insights into how resilience works.

According to Windle (2011), research on resilience has made significant contributions to a wide range of issues and fields by examining resilience in relation to a variety of background conditions (e.g., poverty, family history of psychopathology), personal characteristics (e.g., temperament, cognitive functioning), social relationships (e.g., with family members, peers), and community resources (e.g., teachers, clergymen). In addition, studies on resilience have emphasized the facilitation and development of individuals' abilities and capacities (e.g., social skills, problem solving, and peer refusal skills).

It is also defined as an effective talent that enables a person to cope with adversity while having no negative consequences for his or her functioning (Perry, 2002). With the advancement of research, resilience has been identified as a protective trait that enhances the likelihood of favorable outcomes and healthy personality qualities.

Resilience entails viewing hard life situations as tests of one's tenacity, and they present possibilities to rise above the conditions, even if they do not aid the individual's development. These encounters could also be viewed as tests for quickly

overcoming obstacles (Ryff et al., 2012). According to Connor and Davidson (2003), resilience is a human attribute that permits a person to flourish in the face of adversity. There is a concept of trait resilience, also known as trait orientation, which is personal in nature and aids individuals in dealing with difficult situations, and study findings back up this view of resilience as a personality feature.

Physical health self-regulation, social support, optimism, and cognitive flexibility are all aspects that aid to increase resilience (Howard, Dryden, & Johnson, 1999). One's faith in one's own abilities, effective communication skills, self-esteem, and controlling one's differences to establish successful goals that are practical in nature and take action to attain them are all factors associated to resilience.

As a result of different psychological, mental, and social characteristics, resilience provides a person ability to overcome unforeseen events and also contributes to leadership skills (Jaber, 2014). Resilience is defined as the ability to live a decent enough life and to recognize one's own abilities to do so. It is critical for psychological well-being (Ventevogel et al., 2013).

Students with the correct abilities can face unexpected situations in university life and come to crucial conclusions, which is beneficial to both their well-being and academic achievement. When university students begin their academic careers, they are expected to demonstrate progression from one environment to the next, and they must overcome numerous hurdles relating to academics, as well as cultural background and peer pressure. They must be able to deal with any situation. Some students are prepared earlier by their families, and moving from one environment to another has no negative impact on them; however, some students are negatively impacted and experience various psychological issues, which cause them to fail in their academic careers and negatively impact their societal relationships. Students feel overburdened when they are forced to relocate from one country to another for financial, social, or emotional reasons, which has an impact on their psychological, emotional, and behavioral well-being. University students are the group that would gain the most from resilience trainings and may improve their mental health in a positive way, according to the National Summit on Mental Health of Tertiary Students (Edwards et al., 2016).

Humans employ a variety of techniques to cope with changes in the new environment, depending on the underlying causes of transition. Resilience has

benefits that are linked to perseverance and students ability to preserve their mental health in the face of adversity. Resilient students rely on resilience as a fundamental determinant of mental wellbeing and it is one of the most important components of obtaining a suitable level of mental health (Kashdan&Rottenberg, 2010).

Theoretical Perspective of Resilience

Theoretical prospective on resilience.

Werner theory of resilience. Resilience, according to Werner, is an individual's capacity to deal effectively with adversity, which can involve both internal and external stressors. Internal stressors include a lack of balanced growth and unpredictable conditions, while external stressors include sickness, severe life losses such as the death of a parent, and family disagreements and discords (Werner, 1989). Werner offers an ecological perspective on resilience, claiming that protective elements, which he divides into three levels (individual, community, and family), aid in the promotion of resilience (Werner, 1989). Dispositional characteristics, external support systems, and love bonds within the family and friends are among these determinants. Werner went on to say that the more stressful a person's life is, the more protective elements are required to cope with such stressful conditions. Despite the fact that such protective qualities are known, further study is required to acquire a deeper understanding of them. Protective factors work both directly and indirectly in both directions.

According to Werner, demonstrating harmony with nature's design is a better strategy than managing and meddling in the entire scenario since harmony with nature promotes individual resilience. Resilience varies with time, and this transformation is most likely to occur when children and adults have access to the resources they need. When faced with new problems in life, children and adults, for example, make positive adjustments, such as meeting new people who offer them purpose and so increase their resilience. According to her, interventions that address the balance between risk and protective factors or induce a reduction in stressful life events should be planned.

Psychological Distress

Distress can be defined as some sort of disharmony within the person among his different needs or between his personal needs and outside environment. Whether in situation of too high or too low arousal, the result is always distress.

The emotional and psychological challenges that impair an individual's mental health and functioning are referred to as psychological discomfort (Kessler et al., 2002). Psychological discomfort is a state of emotional anguish marked by symptoms of depression (e.g., loss of interest, melancholy and hopelessness) and anxiety (restlessness and tenseness) (Mirowsky & Ross, 2002). Emotional distress associated with stressors and demands that are difficult to manage with in daily life (Arvidsdotter, 2016). A group of uncomfortable mental and physical symptoms that most people associate with typical mood swings. However, in other situations, psychological distress can signal the onset of a variety of psychological and behavioral issues, as well as cognitive dysfunction (Taylor, 2014). It can lead to unfavorable attitudes toward the environment, people, and even oneself. Sadness, worry, distraction, and mental illness symptoms are all signs of psychological distress (Kim et al., 2017). Exposure to a stressful event that threatens physical or mental health, inability to cope successfully with these stresses, and the emotional turmoil that arises from this inadequate coping are the distinguishing characteristics of psychological distress (Fatima et al., 2011).

Cognitive distress. Stressful conditions might result in inattention, loss of concentration, poor memory, irrational thinking, or confusion. All of these are signs of intellectual distress. Fear, anxiety, despair and a distressed body are all linked to disturbed thinking (cited in Talhat & Aslam, 2012).

Behavioral distress. It is the manifestation of both direct and indirect symptoms. Indirect suffering is defined as the repeated employment of a specific action to alleviate the mental and bodily discomfort of distress (cited in Talhat & Aslam, 2012).

Physical distress. The way a person acts and moves his body parts indicates a lot about him from an inner state of mind. Mouth dryness, restlessness, unusual movements and fatigue, as well as facial expression reflect the inner mental condition as predictors of distress (cited in Talhat&Aslam, 2012).

Components of Psychological Distress

Psychological distress includes the following three basic components:

Depression. Depression is the most common sign of emotional suffering, and it manifests itself in physical, behavioral, and emotional manifestations. Tiredness, feelings of loneliness and isolation, sadness, a sense of being empty on the inside, dullness, a lack of desire for pleasure, and enjoyment sharing are all emotional signs of psychological distress. Irritability, restlessness, mood swings, numerous complaints about annoyances, impaired decision-making, difficulties concentrating, excessive crying even when there is no evident or serious issue, and guilt are all manifestations of depression's behavioral symptoms. Physical indications of psychological discomfort include loss of appetite, constipation, weight loss or gain, insomnia or hypersomnia, headache and even migraine, digestive issues and other stomach troubles, and abnormal heart or pulse rate (Cohen & Wills, 1985).

Many ideas have been developed in an attempt to explain the causes of depression. One of them is Sigmund Freud's psychoanalytical hypothesis. According to this hypothesis, depression may be the cause of suppressed thoughts and feelings, and depressed people express more anger than non-depressed individuals (Comer, 2004).

Depression, according to Aron Beck's, is characterized by a negative triad which a hopeless or gloomy perspective of oneself, the world, and the future (Barlow & Durand, 1999). According to the hypothesis of learned helplessness, bad experiences might lead to a sense of learned helplessness in some persons but not in others.

Anxiety. Anxiety is described as a negative mood state marked by negative emotions and body tension sensations. A person suffering from anxiety is fearful about future danger and bad events. It can include agitated emotions, physiological

responses, and behaviors that are unhealthy (Davison, 2010). Anxiety is also considered to be one of the most basic human emotions. In other words, the expression of sadness is the core component of depression, whereas the display of fear is the basic component of anxiety (Izard & Blumberg, 2019). Anxiety is defined as a person's anxious feeling and the automatic stimulation of skeletal muscles (Lovibond&Lovibond, 1995).

Anxiety can also be caused by an individual's illogical and unreasonable beliefs and thought process, according to cognitive psychologists (Pössel& Smith, 2020). Anxiety is the tendency for a person to believe that events are more hurtful, risky, or dangerous than they actually are. Anxiety is a psychological and physical response to a self-concept marked by subjective, consciously sensed tension emotions. Anxious students suffer cognitive deficiencies such as misinterpretation of information or memory and recall blockage. There are two types of anxiety including state anxiety, which is a reaction to a specific stimulus or set of circumstances, and trait anxiety, which is a personality attribute. A man is anxious and under a lot of stress, and these stressors are making him very uncomfortable (Davison, 2010).

Stress. A stressor is any event or change that requires adaptation, and stress is the body's physiological response to that event or change. People who constantly evaluate life events and experiences as surpassing their resources may be persistently stressed, putting their health at danger from the stress (Davison, 2010).

Psychosocial Outcome of Psychological Distress

Perceived social support refers to a person's perception that they can get emotional or practical help from others when they need it. Psychological distress is linked to a lack of social support from one's partner. Close relatives, parents, and friends (Burke et al., 2019). There are signs that it works differently for men and women, such as the fact that emotional support protects women from depression more than it does for men. In both job and familial situations, women gain support more than males and have more supportive networks than men. Women benefit more from social involvement than men, and social support, particularly emotional support, is frequently linked to leisure-time activities such as hobbies or cultural activities. Leisure-time activities appear to be linked to improved mental health, particularly

when they entail social interactions, and this is especially true for men (Veale et al., 2017).

Theoretical Perspective of Psychological Distress

Interpersonal theory. Psychological problems are attributed to dysfunctional relationship patterns, according to interpersonal theories (Pincus & Ansell, 2013). They stress that we are social beings, and that much of who we are is shaped by our interactions with others. Psychological distress is defined as maladaptive behavior in relationships that is induced by unsatisfying previous or present relationships. Examining the disturbed person's various patterns of interpersonal relationships can reveal psychological discomfort.

According to this viewpoint, discomfort is reduced through interpersonal therapy, which focuses on resolving relationship difficulties and assisting people in developing more satisfying relationships through the acquisition of new interpersonal skills.

Relationship Among Quality of Friendship, Resilience and Psychological Distress

Friendships also perform different support functions than family relationships. Crohan and Antonucci (1989) argue that friendships foster feelings of attachment that are based on equalitarianism, consensus, and sharing of good times. Support from friends is often characterized through reciprocity and the feeling of being needed (Matt & Dean, 1993). Friends provide emotional intimacy and companionship, and the elderly tend to turn to friends when worried or lonely (Cantor, 1979). Friends provide referents for evaluating one's own health and social role. Thus the availability of friends may protect against negative evaluation by making older persons feel competent, efficacious, liked, and needed (Cascavilla et al., 2018). Two recent reviews of this literature document a positive relationship between the social support provided by friends and psychological and physical well-being (Crohan & Antonucci 1989; Lee & Ishii-Kuntz 1987). Illustratively, Lee and Ishii-Kuntz (1987), and Wood and Robertson (1978) observed positive effects of friends interaction and friendship

quality on well-being with friends but no effects for family interactions (Beehr, Farmer, Glazer, Gudanowski, & Nair, 2003).

While social support is commonly assumed to influence well-being, it is possible that well-being and psychological distress may in fact influence social support, that the distress and support relationship may be reciprocal (Wood & Joseph, 2010). For instance, in the Diagnostic and Statistical Manual of Mental Disorders-iii (American Psychiatric Association, 1987), withdrawal from friends and others is identified as a symptom of depression, suggesting that depression leads to withdrawal. Conceivably, such withdrawal may reflect a general loss of interest in the external world (e.g., anhedonia) by the distressed person, or it may indicate the withdrawal of significant others from the psychologically distressed individual (Aneshensel, Frerichs, & Huba, 1984). It is important to note that even if age does not exhibit discernible direct effects on psychological distress, it may exert indirect effects on distress mediated through its influence on other variables, or it may be involved in interaction effects by moderating the effects of other variables on distress. Such indirect and moderator effects require examination in a comprehensive effort to model the social support-distress relationship. Based on theoretical formulations of social role theory, Wright (2000) argues that sex differences in friend support can be expected to increase with age. He notes that for both men and women, the post-parenthood and retirement years are accompanied by a reduction in obligations related to parenting and work roles, allowing more time and resources to be devoted to existing friendships and to forming new ones. However, women are more likely than men to take the opportunity to maintain old friendships and to form new friendships because of larger existing social networks and better social skills. For men, in contrast, retirement is often associated with a loss or weakening of work-related friendships and a lack of non-work-related social networks, social skills, and interest in forming new friendships.

The causal relationships among aging, gender, social support from friends, and psychological distress are of considerable theoretical, empirical, and applied interest. Previous research suggests with considerable consistency that social support from friends has distinct direct positive effects on the psychological well-being of elderly persons. The most salient and noteworthy findings from this study concern reliable

differences in the relationship of friend support and distress between the young-old and the old-old age groups. These findings indicate an age-by- support and age-by-distress interaction effect such that age modifies the effect of support on distress and the effect of distress on support. These interaction effects suggest that over a 22-month interval, low friend support among the old-old leads to higher psychological distress and high psychological distress leads to less friend support. This was not observed for the young-old. This suggests that the old-old are particularly vulnerable to psychological distress when losing friend support, and are vulnerable to losing friend support when experiencing psychological distress. As previously indicated, limited empirical research attention has been given to the conceivable effects of psychological distress on social support. Our observation of cross-lagged effects of distress on support from friends among the old-old is thus distinctly important and should encourage future research to examine possible explanations for the observed differences in age groups (Cebi, 2009).

Human beings respond to adversity in a variety of ways. Despite enduring the most intense obstacles in life, some people manage to escape psychological difficulties and keep healthy functioning (Cohen et al., 2007). For a long time, researchers have been interested in studying resilience, particularly in the context of adults who successfully cope with adversity and manage to live a productive life despite the hazards. Individual life is more likely to be disrupted when risk factors such as conflict, abuse, and deficiency are present. Individual psychology and personality characteristics, family support, and the accessibility of external support networks protect individuals against the negative consequences of risk factors, promoting positive development. Resilience is a concept that evolves and changes when new dangers and or protective factors emerge, as well as changing life circumstances (Davydov, Stewart, Ritchie,&Chaudieu, 2010).

In a sample of students, Haddadi and Besharat (2010) explored the relationship between resilience and indices of vulnerability such as psychological distress, depression, and anxiety, as well as mental health. Result indicates that psychological well-being was found to have a positive link with resilience, while psychological distress, depression, and anxiety were found to have a negative relationship. Self-esteem, personal competency and tenacity, tolerance of negative

effects, control, and spirituality are all factors that influence psychological health and vulnerability indices. Cleverley and Kidd (2011) discuss the results of a study that looked at psychological distress, self-esteem, resilience, and suicidal ideation among homeless and street-involved youth. The findings revealed that resilient kids were less likely to consider suicide, whereas significant psychological distress among youth was linked to high suicidal thoughts.

Perceived close friendship support facilitated resilience most powerfully through a constructive coping style characterized by social support-seeking and active engagement. Effective coping is an integral and pervasive component of resilience (Rutter, 1990). These adolescents' single closest friendship also promoted resilience through effort, supporting previous associations of self-efficacy with resilience and peer health interventions (Martin & Marsh, 2008).

The positive implications of boys' single closest friendship are noteworthy. Our findings suggest that group mechanisms which promote risk are not necessarily evident in boys' single closest friendship. Meanwhile, girls' close friendship weakly promoted maladaptive coping, concurring with previous findings (Rose, 2002). This empirically supports arguments that boys' friendships are critical for psychological well-being. Boys may be intimate, trustworthy, and supportive, even as they face social pressures towards a stoic or macho masculinity, deviance-training processes, and risky behaviors (Dishion, Nelson, & Yasui, 2005). Boys are highly vulnerable. The use and impact of disengaged and externalizing coping was significantly more deleterious for resilience among boys, highlighting the need to differentiate and understand the links between adaptive single close friendships and more risky group processes in processes of boys' vulnerability and resilience.

Greater perceived close friendship quality acted to facilitate resilience through a supportive close friendship network for girls only. This may relate to boys' increased vulnerability to antisocial and maladaptive behavior in groups. It may also relate to participants' number of friends or peer group qualities, which were not assessed. Peer group characteristics are also tied to social skills, peer acceptance, peer rejection, and victimization, which each affects outcomes (Dishion, Nelson, & Yasui, 2005).

Bhukhari and Ejaz (2020) investigated the link between psychological distress, coping methods, and adjustment to university life among university freshmen. Overall adjustment was shown to be significantly adversely associated to psychological distress (Depression, Anxiety, and Stress) among university freshman. Adjustment to university life, on the other hand, was substantially connected to general coping and problem-focused coping techniques.

Qureshi et al. (2021) conduct a study on psychological discomfort and mental well-being among doctors working in Peshawar, Pakistan hospitals. Findings showed that female doctors had more psychological distress than male doctors.

Rationale of the Study

The purpose of this study is to examine the relation between friendship quality, resilience and psychological distress among university students. The university students has a large number of studies in relation to psychological distress, but there is no research in the university student on friendship quality, resilience and psychological distress. Psychological distress is shown to negatively impact students' physical, mental and academic wellbeing (Foster, Allen, Opreacu, & McAllister, 2014). Students are the very relevant, as teacher and parents mainly concern their academic performance and if they are not mentally stable, than they can't show the desired performance. Many university students report experiencing elevated levels of psychological distress that are significantly higher than the general population (Stallman, 2010). University students are the group that would gain the most from resilience trainings and may improve their mental health in a positive way, according to the National Summit on Mental Health of Tertiary Students (Edwards et al., 2016).

Social relationships and interaction are major part one's social life. One such relationship is friendship. Friendship are of crucial important for individual wellbeing. Research on friendship has been a concern of developmental psychology for a long time. The present discussion of the topic will be focused on friendship as a multilayered phenomenon. The important and significant role that friendship plays in the lives of the individuals has been a topic of great interest among the researchers. It has been studied from various perspectives, coming up with very interesting and sometimes surprising results. A very interesting and exciting study came up with the results that the individuals who are tied in the bonds of strong, reliable friendships

live longer (Fehr, 1996). Therefore the researchers would like to see what impact of friendship quality has on mental health of individuals. Further research is needed to explore more about friendship quality and their correlation to depression (Kharimah, Prasetyawati, & Sary, 2017).

Resilience is associated with lowered psychological distress and health-promoting lifestyles in individuals (Black & Gilboe, 2004; Cohan & Stein, 2006). It was proposed in previous studies that there was positive relationship between resilience and mental health of university students. To support this, literature also indicated that resilience is an important central determinant of wellbeing, and resilient students are dependent on ability of resilience and it is one of the essential component of achieving a suitable level of mental health (Kashdan & Rottenberg, 2010).

By assessing friendship quality and resilience, we can identify one of the important predictors of psychological distress. Most of the literature is based on the addressing these variables separately. The aim of this study is to explore the relationship between these construct simultaneously. The present study will hopefully be a great help for those researchers who are interested in investigating quality of friendship, resilience and psychological distress among university students.

Chapter 2

Method

Present research was aimed at investigating the relation of quality of friendship, resilience and psychological distress among university students. Objectives of the study which are as follow:

Objectives

1. To study the relationship among quality of friendship, resilience, and psychological distress among university students.
2. To determine the role of various demographics (gender, age, family system, duration of friendship, time spent with friends) in relation to study variables.

Hypotheses

To fulfill the objectives of the present research, following hypotheses were formulated:

1. High quality friendship will negatively predict psychological distress among university students.
2. High quality friendship will positively predict resilience among university students.
3. Resilience will negatively predict psychological distress among university students.
4. Female students will score high on psychological distress as compared to male students.

5. Female students will score high on friendship quality as compared to male students.
6. Students with more year of friendship have more friendship quality.

Operational Definition of Variables

Following are the conceptual operational definitions of study variables.

Quality of friendship. According to Reisman (1985), friendship can be defined as strong bond of affiliation between individuals held together by mutual caring, sharing of thoughts, interests and spending time in each other's company. In the present study quality of friendship was measured through score on Friendship Quality Questionnaire-Friends Function by Mendelson and Abound (1999), high scores indicates high quality of friendship.

Resilience. It can be defined as the personal qualities that enable one to thrive in the phase of adversity (Connor & Davidson, 2003). The resilience scale of Nicholson McBride Resilience Questionnaire (NMRQ) was used in the current research to operationalize resilience where high score on the scale indicated high resilience.

Psychological distress. Psychological distress is defined as an unpleasant emotional state that affect individual's physical and psychological functioning. It is mental uneasiness that disturbs daily life activities. It can result in negative views of the environment, others, and the self. Sadness, anxiety, distraction, and symptoms of mental illness are manifestations of psychological distress (Kim et al., 2017). In current research, psychological distress was operationalize through score on Depression Anxiety Stress Scale where high scores indicate higher level of psychological distress.

Instruments

Data was collected with the help of following instruments along with demographic sheet. Description of the scale used in the study are given below:

Demographic sheet. In order to explore variety of demographics gender, age, family system, duration of friendship, time spent with friends, a detailed demographic sheet was developed.

Friendship Quality Questionnaire-Friends Function. The friendship quality questionnaire was developed by Mendelson and Abound (1999). It is a self-reported questionnaire and measures the extent to which friends fulfill certain friendship functions. It has 6 subscales which includes stimulating companionship (items = 4, 7, 18, 22 and 28), intimacy (items = 3, 8, 15, 21 and 29), reliable alliance (items = 5, 12, 16, 20 and 26), help (1, 9, 13, 24 and 27), self-validation (6, 10, 17, 19 and 25) and emotional security (items = 2, 11, 14, 23, 30).

The scale is a 5 point Likert scale and response options were 0 = never, 1 = rarely, 2 = once in a while, 3 = fairly often and 4 = always. There are no reverse items. Alpha reliability of friendship quality questionnaire is .92, .91 for stimulating companionship, .94 for intimacy, .95 for reliable alliance and .92 for emotional security. High scores on the scale indicate high quality of friendship and low scores on scales indicate low quality of friendship.

Nicholson McBride Resilience Questionnaire. Nicholson McBride Resilience Questionnaire (NMRQ) is a 12 item measure by McBride (2020). It is a self-report 12 item questionnaire based on a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Scores ranges of 0-37, 38-43, 44-48 and 49-60 indicate developing, established, a strong and exceptional level of resilience. The reliability estimated by Cronbach's Alpha equal to .76.

Depression Anxiety Stress Scale. The Depression, Anxiety and Stress Scale (Lovibond & Lovibond, 1995) is a set of three self-report scales designed to measure of depression, anxiety and stress. It consist of three subscales including depression subscale (items 3, 5, 10, 13, 16, 17 and 21), anxiety subscale (items 2, 4, 7, 9, 15, 19 and 20) and stress subscale (items 1, 6, 8, 11, 12, 14 and 18) making a total of 21 items. The depression scale assesses dysphoria, hopelessness, devaluation of life, self-deprecation, lack of interest / involvement, anhedonia and inertia. The anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The stress scale is sensitive to levels of chronic nonspecific arousal. It assesses difficulty relaxing, nervous arousal, and being

easily upset / agitated, irritable / over-reactive and impatient. All the subscales have very good reliabilities of .85, .81 and .80 respectively for depression, anxiety and stress subscales. It is a four point rating scale ranging from 0= did not apply to me at all, 1 = applied to me to some degree or some of the time, 2 = applied to me to a considerable degree or a good part of time and 3 = applied to me very much or most of the time. High scores on any of the subscale indicates the experience of that form of psychological distress by university students.

Research Design

The current research was a cross-sectional and correlational study aimed at investigating the relation between quality of friendship, resilience and psychological distress among university students.

Sample

A convenient sample of university students ($N = 300$) including both male students ($n = 160$) and female students ($n = 140$) was taken for current research. The age range of sample was 18-28 years old. The study population was taken from the public and private universities of Rawalpindi and Islamabad.

Table 1

Demographic Profile of Research Participants (N = 300)

Variables	<i>f</i>	%
Gender		
Male	160	53.3
Females	140	46.7
Family System		
Nuclear	167	55.7
Joint	133	44.3
Duration of Friendship		
Less than 1 year	102	34
1.1-2 years	105	35
2.1-3 years	62	20.7
More than 3 years	31	10.3
Time spent with Close/ Best Friend		
1 hour or less	75	25
2-4 hours	98	32.7
4 or more hours	127	42.3

Procedure

The study was conducted in the twin cities of Pakistan from universities of Islamabad and Rawalpindi (Numl, QAU, Arid and IIUI). Prior to the administration of the questionnaires, informed consent was taken from participants. Students were requested to fill the questionnaires and they were briefed about the purpose of the study. Guidelines were given both verbally and in written pattern to the participants for their understanding. The questions and queries were addressed by the researcher during questionnaires filling. Participants were also assured that the information will be kept confidential and will only be used for the research purpose. The students were requested to respond each item as accurately as possible and not to skip any item. Participants were assured that they can withdraw from the study at any stage. At the end, participants were thanked for their cooperation.

Chapter 3

Results

The aim of present study was to investigate the relationship between quality of friendship, resilience and psychological distress among university students and to demonstrate the role of demographic variables in relation to study variables. It was a quantitative study and the analyses were run on the data using Statistical package for Social Sciences (SPSS). Descriptive and inferential statistics were used to obtain significant results. The internal consistency of scales was resolute with the help of Cohen's alpha reliability coefficient. Pearson Product Moment Correlation was used to explore the relationships between variables of the study. Independent Sample t-test and ANOVA was computed to ascertain group differences along with demographic variables. Regression analysis was used to investigate the enduring predictor between variables. The results are presented in tabulated form.

Reliability Estimate and Descriptive Statistics of Measures

Table 2 shows descriptive statistics and reliability estimates for all study measures.

Table 2

Alpha Reliability Coefficients and Descriptive Statistics of Depression Anxiety Stress scale (DASS), McGill Friendship Questionnaire - Friendship Functions (MFQ-FF) and Nicholson McBride Resilience Questionnaire, (N =300)

Scales	No. of Items	α	M	SD	Skew	Kurt	Range	
							Actual	Potential
DASS	21	.89	19.70	12.20	.81	-.41	1-50	0-63
Dep	7	.82	5.94	4.57	.84	.06	0-18	0-21
Anx	7	.76	6.69	4.34	.77	-.23	0-17	0-21
Str	7	.81	7.06	4.45	.64	-.55	0-18	0-21
MFQ-FF	30	.88	90.11	24.72	-1.49	1.62	10-116	0-120
SC	5	.83	15.22	4.33	-1.32	.97	3-20	0-20
Int	5	.87	13.92	4.97	-.94	-.11	1-20	0-20
RA	5	.86	15.51	4.40	-1.40	1.49	0-20	0-20
Help	5	.86	15.30	4.29	-1.52	1.77	2-20	0-20
SV	5	.86	14.88	4.56	-1.34	1.21	0-20	0-20
ES	5	.87	15.27	4.50	-1.41	1.24	2-20	0-20
NMRQ	12	.86	41.04	8.49	-.84	.353	17-55	5-60

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire.

Table 2 presents alpha reliabilities and descriptive statistics for Depression Anxiety Stress scale (DASS), McGill Friendship Questionnaire- Friendship Functions (MFQ-FF) and Nicholson McBride Resilience Questionnaire. This table shows mean, standard deviation, alpha reliability, skewness, kurtosis, actual and potential ranges for all variable. Cronbach's alpha suggest decent to incredible internal consistency for all the parameters employed. It has been found that the scales used to measure resilience have shown a good reliability of .86, whereas the reliability of Depression Anxiety and Stress scale along with the each domain has been calculated. It has been found that DASS subscales have shown a good reliability ranges from .76 to .82, whereas McGill Friendship Questionnaire- Friendship Functions (MFQ-FF) measure friendship quality has produced an excellent alpha reliability ranges from .83 to .87 indicating that these measures can be trusted with the respective constructs being measured. There are also skewness and kurtosis values indicating if data are regularly distributed throughout the population. The values of standard deviations indicates that responses are scattered from the mean of each variable.

Table 3*Correlation Matrix of all the Study Variables (N=300)*

Variables	1	2	3	4	5	6	7	8	9	10	11	12
1 DASS	-	.92**	.89**	.92**	-.57**	-.52**	-.49**	-.51**	-.55**	-.52**	-.53**	-.68**
2 Dep		-	.72**	.79**	-.55**	-.49**	-.47**	-.48**	-.53**	-.52**	-.54**	-.65**
3 Anx			-	.73**	-.53**	-.51**	-.46**	-.51**	-.51**	-.47**	-.48**	-.59**
4 Str				-	-.47**	-.43**	-.42**	-.40**	-.46**	-.43**	-.44**	-.61**
5 MFQ-FF					-	.90**	.89**	.89**	.92**	.92**	.94**	.72**
6 SC						-	.77**	.78**	.81**	.80**	.82**	.67**
7 Int							-	.75**	.82**	.74**	.80**	.65**
8 RA								-	.79**	.80**	.80**	.65**
9 Help									-	.84**	.86**	.69**
10 SV										-	.87**	.64**
11 ES											-	.65**
12 NMRQ												-

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire **p < .01. *p < .05.

Table 3 presents direction and the relationship between the research variables. Analyses suggest a significant positive relationship between friendship quality and its subscales (stimulating companionship, intimacy, reliable alliance, help, self-validation and emotional security) and resilience. On the other hand, psychological distress shows significantly negatively correlate with resilience and friendship quality.

Comparison of Demographic Variables on Study Variables

The groups were formulated on the basis of difference in gender (*Females and Males*) and family system (*nuclear and joint*). The demographics having two groups are analyzed through independent sample *t*-test, and demographics having three groups are analyzed through ANOVA.

Table 4

Gender Difference on Study Variables (N = 300)

Variables	Female (n=140)		Male (n=160)		<i>t</i>	<i>p</i>	95% CI		Cohen' <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			<i>LL</i>	<i>UL</i>	
DASS	13.18	4.18	11.78	4.91	2.84	.00	.43	2.37	.30
Dep	7.15	4.97	4.89	3.91	4.32	.00	1.22	3.28	.50
Anx	7.55	4.46	5.93	4.09	3.28	.00	.65	2.59	.37
Str	7.78	4.65	6.43	4.18	2.65	.00	.34	2.35	.30
MFQ-FF	27.66	5.83	29.10	9.26	-1.81	.07	-3.00	.12	-
SC	14.79	4.53	15.96	3.86	1.82	.14	-1.56	.93	-
Int	13.95	5.03	15.00	4.53	1.92	.12	-1.57	.79	-
RA	14.93	4.47	16.21	4.19	1.69	.16	-.96	1.81	-
Help	14.99	4.34	15.88	3.81	1.32	.26	-.00	2.73	-
SV	14.39	4.63	15.66	4.17	2.13	.09	-.81	2.20	-
ES	14.74	4.68	16.03	4.03	2.16	.09	-.32	2.46	-
NMRQ	40.83	7.84	40.99	8.61	2.14	.09	-4.28	-.39	-

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire.

Table 4 illustrates the gender differences on psychological distress, friendship quality, resilience and their subscales. Significant gender differences on psychological distress were being observed. On psychological distress (depression, anxiety and stress) females scored higher than males. While on friendship quality and resilience no significance differences were found.

Table 5*Family System Difference on Study Variables (N = 300)*

Variables	Nuclear (n=167)		Joint (n=133)		<i>t</i>	<i>P</i>	95% CI		<i>Cohen'</i> <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			<i>LL</i>	<i>UL</i>	
DASS	18.75	3.10	18.94	3.29	-.58	.55	-.81	.44	-
Dep	6.31	4.56	5.48	4.56	1.57	.11	-.20	1.88	-
Anx	6.89	4.32	6.43	4.36	.90	.36	-.53	1.44	-
Str	7.46	4.61	6.55	4.21	1.76	.07	-.10	1.92	-
MFQ-FF	28.11	6.03	28.42	8.28	-.38	.69	-1.88	1.26	-
SC	15.05	4.64	15.43	3.92	-.75	.44	-1.37	.61	-
Int	14.05	5.15	14.45	4.35	-.72	.47	-1.50	.69	-
RA	15.46	4.66	15.57	4.07	-.21	.83	-1.12	.89	-
Help	15.14	4.57	15.51	3.91	-.73	.46	-1.34	.61	-
SV	14.75	4.94	15.04	4.06	-.55	.57	-1.31	.73	-
ES	15.21	4.86	15.33	4.01	-.22	.82	-1.12	.89	-
NMRQ	40.77	8.89	41.38	7.97	-.61	.54	-2.54	1.33	-

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire.

Independent sample t-test was carried out to study variable. Table 5 illustrates the differences on the basis of family system on psychological distress, friendship quality and resilience. No significant differences were found.

Table 6

One Way ANOVA for Duration of Friendship in All Study Variables (N=300)

Variables	>1year (n=102)	1.1-2 years (n=105)	2.1-3 years (n=62)	>3.1 years (n=31)	<i>F</i>	<i>p</i>	<i>i-j</i>	<i>D(i-j)</i>	95% CL	
	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)	<i>M</i> (<i>SD</i>)					<i>LL</i>	<i>UL</i>
DASS	8.23 (1.58)	8.14 (1.71)	8.00 (1.75)	7.99 (1.37)	.86	.48	-	-	-	-
Dep	6.01 (4.75)	6.33 (4.76)	6.06 (4.30)	4.16 (3.52)	1.86	.13	-	-	-	-
Anx	6.69 (4.35)	7.08 (4.44)	6.66 (4.51)	5.38 (3.45)	1.22	.30	-	-	-	-
Str	7.44 (4.44)	7.43 (4.66)	7.01 (4.28)	6.90 (4.10)	3.62	.08	-	-	-	-
MFQ-FF	21.75 (8.92)	23.19 (7.97)	27.02 (8.42)	31.03 (9.27)	22.04	.03	4>2	7.84	12.91	5.65
SC	2.96 (2.07)	6.04 (3.58)	11.12 (4.34)	14.22 (5.21)	146.61	.00	4>2	5.08	4.08	6.07
Int	4.03 (2.30)	7.11 (3.89)	10.84 (4.25)	12.42 (5.82)	94.56	.01	4>2	3.73	2.69	4.77
RA	4.08 (2.30)	7.75 (3.83)	11.45 (4.14)	12.82 (6.02)	115.97	.00	4>1	6.81	5.83	7.79
Help	12.13 (5.62)	16.34 (2.88)	16.30 (3.27)	16.48 (3.25)	33.25	.00	4>1	4.24	3.12	5.35
SV	12.37 (5.74)	16.08 (3.32)	15.4 (4.05)	16.48 (4.32)	17.35	.02	4>1	3.06	1.82	4.31

ES	12.18 (5.65)	16.48 (3.25)	16.14 (3.67)	17.03 (4.52)	27.81	.00	4>1	3.95	2.76	5.14
NMRQ	39.79 (9.40)	40.99 (8.61)	40.83 (7.84)	44.45 (7.68)	2.16	.09	-	-	-	-

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire.

Table 6 describes the comparison of means using one way ANOVA for duration of friendship quality. It indicates that the sample having 4 or above years of friendship duration showed high level of quality of friendship as compared to those with 1 year or less duration of friendship. The findings indicated that adults with more years of friendship have more quality and attachment in their friendship. These patterns of finding is had also been shown in prior literature (Bauminger, Finzi-Dottan, Chason&Har-Even, 2008).

Table 7

One Way ANOVA Analysis on Time SpendWith Friends on All Study Variables (N=300)

Variables	1 hour or less	2-4 hours	4 or more hours	F	p	i-j	D(I-j)	95 % CI	
	(n=75)	(n=98)	(n=127)					LL	UL
	M (SD)	M (SD)	M (SD)						
DASS	11.92 (4.84)	6.55 (4.25)	4.15 (2.90)	61.55	.02	1>3	6.11	.29	11.91
Dep	8.41 (5.10)	3.89 (2.89)	6.07 (4.58)	23.96	.00	1>2 1>3	4.51 2.34	3.22 1.12	5.80 3.56
Anx	9.30 (4.92)	5.47 (3.32)	6.07 (4.04)	21.19	.01	1>2 1>3	3.82 3.22	2.59 2.05	5.05 4.39
Str	9.16 (4.71)	5.38 (3.54)	7.11 (4.43)	16.84	.00	1>2 1>3	3.77 2.04	2.49 .82	5.05 3.25
MFQ-FF	24.80 (7.06)	37.77 (11.81)	49.18 (11.46)	22.04	.00	2>1 3>1	-2.40 -7.76	4.13 9.48	-.68 -6.05
SC	12.40 (5.57)	16.17 (3.05)	16.15 (3.59)	24.49	.01	2>1 3>1	3.77 3.75	2.55 2.60	4.99 4.91
Int	11.01 (5.53)	14.77 (4.44)	15.71 (3.62)	27.60	.00	2>1 3>1	3.76 4.70	2.42 3.43	5.10 5.97
RA	12.65 (5.80)	16.50 (3.03)	16.43 (3.56)	24.28	.04	2>1 3>1	3.84 3.77	2.60 2.60	5.08 4.95
Help	12.13 (5.62)	16.34 (2.88)	16.3 (3.27)	33.25	.00	2>1 3>1	4.21 4.24	3.03 3.12	5.38 5.35
SV	12.37 (5.74)	16.08 (3.32)	15.4 (4.05)	17.35	.02	2>1 3>1	3.70 3.06	2.39 1.82	5.01 4.31
ES	12.18 (5.65)	16.48 (3.25)	16.14 (3.67)	27.81	.00	2>1 3>1	4.30 3.95	3.05 2.76	5.55 5.14
NMRQ	36.22 (10.77)	43.27 (6.70)	42.17 (7.02)	18.51	.00	2>1 3>1	7.04 5.94	4.62 3.64	9.47 8.24

Note. DASS= Depression Anxiety and Stress Scale; Dep = Depression; Anx = Anxiety; Str = stress; MFQ-RR = McGill Friendship Questionnaire- Friendship Functions; SC = Stimulating companionship; Int = Intimacy; RA= Reliable alliance; Help = Help; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire.

Table 7 describes the comparison of means using one way ANOVA on time spend with friend of N=300. Over here time spend with friends were categorize into three categorize. Students spend 1 hour or less with their friend scored high on depression, anxiety and stress which indicate that individual that spend less hour with their friends had high level of psychological distress. While individuals that spend 2-4

hours with their friends had low level of psychological distress as compared to individual that spend 1 hour or less and 4 or more hours. On friendship quality subscales and resilience scale individuals that spend 1 hour or less scored low which means that individual that spend less hour with their friend had low friend and resilience as compared to those who spend more time with their friend. These findings are consistent with already existing research data which explains that friends who spend more quality time with each other work as protective factors for many psychological issues (Hall, 2018).

Table 8

Linear Regression Analysis showing the role of Friendship Quality and Resilience on Psychological Distress among University Students (N=300)

Variables	Psychological distress			
	Model 1	Model 2		
		β	β	95% CI
			LL	UL
Constant			3.89	30.00
Age	.03	.05	-.24	.78
Gender	-.11	-.07	-3.68	-.10
DOF	-.10	-.13	-2.85	-.46
FMS	-.13	-.10	-4.34	-.82
TWF	-.03	-.01**	-1.09	1.28
Friendship quality				
SC		-.00**	-.43	.39
Int		-.03**	-.55	.16
RA		-.05	-.59	.16
Help		-.04**	-1.32	-.35
SV		-.02**	-.52	.37
ES		-.07	.02	1.03
NMRQ		-.02**	-.55	-.22
R ²	.56	.63		
ΔR^2		.064		
F	43.74 ***	33.58 ***		
ΔF		8.35***		

Note. Dep = Depression; Anx = Anxiety; Str = stress; SC = Stimulating companionship; Int = Intimacy; RA = Reliable alliance; SV = Self-validation; ES = Emotional security; NMRQ = Nicholson McBride Resilience Questionnaire; DOF= Duration of friendship;

Table 8 shows linear regression analysis which describes the role of friendship quality and resilience on psychological distress among university students. In this table the predictor variable are friendship quality and resilience and the outcome

variables is psychological distress. Findings shows that friendship quality appears to be significant negative predictor for psychological distress. For psychological distress resilience also appears to be a significant negative predictor.

Chapter 4

Discussion

The present study was conducted to explore the relation between friendship quality, resilience and psychological distress among university students. It was also intended to study the role of various demographic with refers to study variable. University student was taken as a sample. The study was conducted in the twin cities of Pakistan from universities of Islamabad and Rawalpindi.

First hypothesis of the study that friendship quality will be negatively related to psychological distress. The findings of the current study revealed a negative relation between friendship quality and psychological distress. This conclusion corroborated earlier research that revealed a significant relation between friendship quality and psychological well-being among university students in Turkey in an investigation done by Akn et al. (2016). According to Sahin et al. (2011), there is a positive and meaningful relationship between perceived social support and well-being. Friendship quality and psychological well-being of university students were found to have positive and significant relationships (Chow et al., 2013; Doğan&Yıldırım, 2006; Rodriguez et al., 2018).Siegel (2004) discovered a negative relationship between friendship quality and depression symptomatology in his study. Doğan and Yıldırım(2006) discovered a significant and favorable relationship between university students' well-being and friendships. As a result, high levels of friendship quality have been linked to favorable psychological outcomes. Friendship quality predicts well-being, particularly during times of transition such as youth and puberty (Bagwell et al., 2005). The quality of one's friendships has also been proven to be negatively related to depression (Windle, 1994).

Result showed that friendship quality positively related to resilience (Saraswati&Suleeman, 2018). These findings support the hypothesis no 2 that is high

friendship quality will positively related to resilience. Findings revealed a positive association between greater perceived friendship quality and increased resilience (Graber, Turner,& Madill, 2016).

Results revealed that psychological distress have negative relationship with resilience among university students. These results supports hypothesis no 3 that resilience will be negatively related to psychological distress. Findings from previous researches also supported the current results; for example, Haddadi and Besharat (2010) investigated the association of resilience with indices of vulnerability including psychological distress, depression, and anxiety; and mental health in a sample of students and establish that there is a positive relationship between resilience and psychological well-being and negative relationship between psychological distress, depression and anxiety. Resilience and psychological well-being have a substantial positive relationship. Resilience emerges as a new predictor of psychological well-being. Resilience is the capacity to recover quickly and successfully from adverse situations (Tugade& Fredrickson, 2004). Resilience acts as a protective factor which enhances positive thoughts and leads to healthy personality characteristics (Shastri, 2013). People who are resilient are less likely to view a stressful situation as distressing, which contributes to their psychological well-being. Resilience is associated with positive self-evaluations, a sense of progress, development, and self-determination, and it increases an individual's belief in a purposeful and meaningful existence, therefore contributing to psychological well-being (Fava & Tomba, 2009).

With the purpose of exploring the relationship between demographics and study variables, correlation and mean differences were computed. To explore gender differences in the study variables, independent sample *t*-test was performed for each variable (Table 4). Significant gender differences were found on psychological distress. Results support hypothesis no 4 that females scored high on psychological distress as compared to males. Females found to be more stressed than males which then leads to depression. Support that women score high on depression as compared to men (Beck & Harris, 1978). There might be number of reasons that is, males are socialized in a way that they feel hesitant to disclose their stress. They are expected to be strong and emotionally stable which prevents them from showing their feeling of

stress. The most likely cause for the higher prevalence of stress in girls is that women perform a discriminating gender role that is somewhat inferior to that of males.

Table 4 indicates gender differences. Results rejected hypothesis no 5 that females scored high on friendship quality. As previous researches showed that females are supposed to have high friendship quality than males (Buhrmester, Furman, Wittenberg, & Reis, 1988). Results show no significant difference in friendship quality in gender. This result is supported by the findings of Parker and Asher (1993). Their study found no gender variations in the quality of friendship. On all aspects of friendship quality, both genders are equal. Previous study has found no gender differences in the quality of friendship between males and females (Sharabany, Gershoni, & Hofman, 1981). For the total resilience score, there were no gender differences. Similar no gender differences in resilience have previously been reported in adolescents (Hjemdal, Friborg, Stiles, Martinussen, & Rosenvinge, 2006) and in adults (Friborg et al., 2003).

Table 5 indicates differences on the basis of family system (nuclear and joint) results shows that there is no significant mean differences on these variables across the groups of family system in resilience and psychological distress. These findings are consistent with those of Selvaraj (2015) where no significant differences were found.

Table 6 shows significant differences according to duration of friendship on study variables (quality of friendship). That support hypothesis no 5 that individual with more year of friendship have more friendship quality. According to the findings, persons with more years of friendship had higher levels of quality and attachment in their friendship. These patterns of discovery had already been demonstrated in the literature (Bauminger, Finzi-Dottan, Chason & Har-Even, 2008). Close friendships that last a long period can considerably contribute to positive and good consequences. Increased relationship closeness results from a sense of coherence (the idea that life is predictable (Bauminger, Finzi-Dottan, Chason & Har-Even, 2008).

For testing the hypothesized predicting abilities of the variables, method of data analyses were utilized. Linear regression were used to examine the role of friendship quality, resilience and psychological distress (Table 8). Findings showed

that friendship quality appears to be a significant predictor of psychological distress. Previous study have shown that friendship quality was a predictor of psychological well-being were found (Chow et al., 2013; Doğan&Yıldırım, 2006; Rodriquez et al., 2003). For psychological distress, resilience appears to be a strongest negative predictor. Resilience is repeatedly found to be negatively associated with psychological distress, a negative predictor of psychological distress (Friborg et al., 2003).

ANOVA on time spent with friends showed the most significant differences (Table 7). The general trend showed that people who spent more time with friends had high resilience and had higher friendship quality. Furthermore, people who spent more time with friends had low psychological distress. These findings are consistent with already existing research data which explains that friends who spend more quality time with each other work as protective factors for many psychological issues (Hall, 2018).

Conclusions

The present study aimed to explore relationship between quality of friendship, resilience and psychological distress among university students. Sample was comprised of university students, the results concluded that quality of friendship and resilience have negative relation to psychological distress. Furthermore, there is a positive relation between friendship quality and resilience. The present study has practical and theoretical implications.

Implications of the Study

Present study is concerned with the relationship between psychological distress in relation to friendship quality and resilience among university students. On the basis of the study finding relevant to friendship, resilience, and psychological distress, following implications can be devised:

1. The finding of present study would be beneficial for the university students' counseling because the friendship quality offers a significant role towards individuals lives.
2. This study will also be helpful in social psychological understanding of distressed behavior in close friendships.

3. This study can contribute in different intervention plans regarding mental health and psychological problems of university students. This intervention can be used in health psychopathology in the field of developmental psychology or anywhere where adults face problems of friendship quality related and manage their psychological problems in relationships or social settings.
4. Finally, this study holds important implications for future research and for current application to university student populations. High rates of psychological distress and the lack of students seeking help due to the stigma of mental illness, the cultivation of resilience could be promoted by implementing mindfulness based resilience training programs in universities.

Limitation and Suggestions

There are always certain limits in any study, no matter how thoroughly it was performed. There were several limitations to this study, which are linked below.

1. The questionnaire utilized were self-report inventories, which had a higher risk of bias in response reporting
2. Sample size was limited to only students from Rawalpindi and Islamabad which hinders the generalizability of the research. So future researcher should collect their sample across different universities and region in Pakistan.
3. The study can be repeated employing a relatively large sample of students. Increase in sample size provides the opportunity to generalize the findings.

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